

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) RECLAIM AMERICA PAC		FEC IDENTIFICATION NUMBER ▼ C C00500025	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee AOL Advertising		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 770 Broadway 6th Fl.		Amount 5730.00	
City New York	State NY	Zip Code 10003	Transaction ID : SE.4162
Purpose of Expenditure IE-Ernst-Online Ads	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2014	
Name of Federal Candidate JONI K ERNST		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Basswood Research		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 27 / 2014	
Mailing Address 4550 Montgomery Ave. Ste. 906		Amount 1200.00	
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.4165
Purpose of Expenditure IE-Ernst-Research	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2014	
Name of Federal Candidate JONI K ERNST		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6930.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lisa Lisker

[Electronically Filed]

Date

MM / DD / YYYY
05 / 28 / 2014

Signature